



Valerie Jo Young, William R. Kerr, Venkataraman Prasannan and Myron H. White

Application No.: 09/872,478

pplication of:

Filed: June 1, 2001

For: VOICE-OVER IP COMMUNICATION WITHOUT ECHO CANCELLATION

Date: September 19, 2001

Group Art Unit: 2661

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS: BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO:

ASSISTANT COMMISSIONER FOR PATENTS WASHINGTON, DC 20231

ON:

September 19, 2001

Kitty Sisk

## TRANSMITTAL LETTER

TO THE COMMISSIONER FOR PATENTS:

Enclosed for filing in the above-referenced application are the following:

- [ Notice to File Missing Parts of Nonprovisional Application
- [ ] Combined Declaration and Power of Attorney
- [ ] Request for Correction of Filing Receipt; copy of Filing Receipt with correction noted thereon
- [/] Substitute drawings in compliance with 37 CFR 1.84
- [ ] Surcharge of \$130.00 for late filing of declaration
- [/] A check for \$1,234.00 in payment of the surcharge and filing fee
- [ ] Fee Transmittal (in duplicate)
- [ ] Return receipt postcard

Respectfully submitted,

Valerie Jo Young, William R. Kerr, Venkataraman Prasannan and Myron H. White

By:

Micah D. Stolowitz

Registration No. 32,758

STOEL RIVES LLP 900 SW Fifth Avenue, Suite 2600 Portland, Oregon 97204-1268

Telephone: (503) 224-3380 Facsimile: (503) 220-2480 Attorney Docket No. 26152/11:2

PTO/SB/17 (09-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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## **FEE TRANSMITTAL** for FY 2001

Patent fees are subject to annual revision.

TOTAL	AMOUNT	OF	PAYMENT

(\$) 1,234.00

Complete if Known					
Application Number 09/872,478					
Filing Date	June 1, 2001				
First Named Inventor Valerie Jo Young					
Examiner Name		_			
Group Art Unit	2661				
Attorney Docket No.	26152/11:2				

METHOD OF PAYMENT		FEE CALCULATION (continued)						
The Commissioner is hereby authorized to charge indicated fees and credit any overnayments to:		ITION						
indicated fees and credit any overpayments to		Entity Fee	Small Fee	Entity Fee				
Deposit	Fee Code	(\$)	Code	(\$)	Fee Description F	ee Paid		
Account 19-4455	105	130	205	65	Surcharge - late filing fee or oath	400 1		
Deposit	103	130	205	00	Surcharge - late filling lee of batti	130		
Account Name Stoel Rives LLP	127	50	227	25	Surcharge - late provisional filing fee or cover sheet			
X Charge Any Additional Fee Required	139	130	139	130	Non-English specification			
Under 37 CFR 1.16 and 1 17	147	2,520	147	2,520	For filing a request for ex parte reexamination			
Applicant claims small entity status. See 37 CFR 1.27	112	920*	112	920*	Requesting publication of SIR prior to			
2. X Payment Enclosed:	113	1,840*	113	1,840*	Examiner action Requesting publication of SIR after Examiner action			
X Check Credit card Money Order Other	115	110	045					
	1		215	55	Extension for reply within first month			
FEE CALCULATION	116	390	216	195	Extension for reply within second month			
1. BASIC FILING FEE	117	. 890	217	445	Extension for reply within third month			
Large Entity Small Entity Fee Fee Fee Fee Description	118	1,390	218	695	Extension for reply within fourth month			
Code (\$) Code (\$) Fee Paid	128	1,890	228	945	Extension for reply within fifth month			
101 710 201 355 Utility filing fee 710	119	310	219	155	Notice of Appeal			
106 320 206 160 Design filing fee	120	310	220	155	Filing a brief in support of an appeal			
107 490 207 245 Plant filing fee	121	270	221	135	Request for oral hearing			
108 710 208 355 Reissue filing fee 138 1,510 138 1,510 Petition to institute a public use proceeding								
114 150 214 75 Provisional filing fee	Petition to revive - unavoidable							
SUBTOTAL (1) (\$) 710	141	1,240	241	620	Petition to revive - unintentional			
2. EXTRA CLAIM FEES	142	1,240	242	620	Utility issue fee (or reissue)			
Fee from Extra Claims below Fee Paid	143	440	243	220	Design issue fee			
Total Claims 33 -20** = 13 X 18 = 234					· · · · · · · · · · · · · · · · · · ·			
Independent 5 3** = 5 X 5 20 400	144	600	244	300	Plant issue fee			
Claims 5 2 2 ^ 80 = 150  Multiple Dependent	122	130	122	130	Petitions to the Commissioner			
Within the Dependent	123	50	123	50	Petitions related to provisional applications			
	126	240	126	240	Submission of Information Disclosure Stmt			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	581	40	581	40	Recording each patent assignment per property (times number of properties)			
Code (\$) Code (\$)	146	710	246	355	Filing a submission after final rejection (37 CFR § 1 129(a))			
103 18 203 9 Claims in excess of 20	l				<u> </u>			
102 80 202 40 Independent claims in excess of 3	149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	i		
104 270 204 135 Multiple dependent claim, if not paid	470	740	070		ļ <u>.</u>			
109 80 209 40 ** Reissue independent clarms over original patent	179	710	279	355	Request for Continued Examination (RCE)			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	169	900	169	900	Request for expedited examination of a design application			
	Other f	ee (spe	cify)		- ···			
SUBTOTAL (2) (\$) 394	l		•					
	* Reduced	by Bas	sic Filin	g Fee P	aid SUBTOTAL (3) (\$) 130	,		
**or number previously paid, if greater; For Reissues, see above	<u> </u>	·			· · · · · · · · · · · · · · · · · · ·			
SUBMITTED BY Complete (if applicable)								

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Registration No. (Attorney/Agent)

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



32,758

Complete (if applicable)

Telephone

(503) 224-3380

September 19, 2001

Name (Print/Type)

Signature

Micah D. Stolowitz

PTO/SB/17 (09-00)

Approved for use through 10/31/2002. OMB 0651-0032

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SUBTOTAL (2) (\$) 394						===	
**or number previously paid, if greater; For Reissues, see above	* Reduced	by Basi	c Filing	Fee Pa	sid SUBTOTAL (3) (\$) 13	<u> </u>	

SUBMITTED BY				Complete (if applicable)		
Name (Print/Type)	Micah D. Stolowitz	Registration No (Attorney/Agent)	32,758	Telephone	(503) 224-3380	
Signature	Musaf D. Teller			Date	September 19, 2001	

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